

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CA (AMBULATORY)

**Facility Information**

**Facility Name:** CEDAR HOUSE (510278)

**Address:** 145 W SUMMIT AVE, ELLSWORTH, WI 54011

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/02/1996

**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0095999      **End Date:** 11/07/2005      **Type:** ABBREVIATED      **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0095882      **End Date:** 10/11/2005      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #10006371    Served 11/03/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.41(5)(a)4	BATHROOMS SHALL PROVIDE PRIVACY	11/07/2005	Yes
83.43(3)(b)2	TESTING OF SMOKE DETECTORS	11/07/2005	Yes

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*